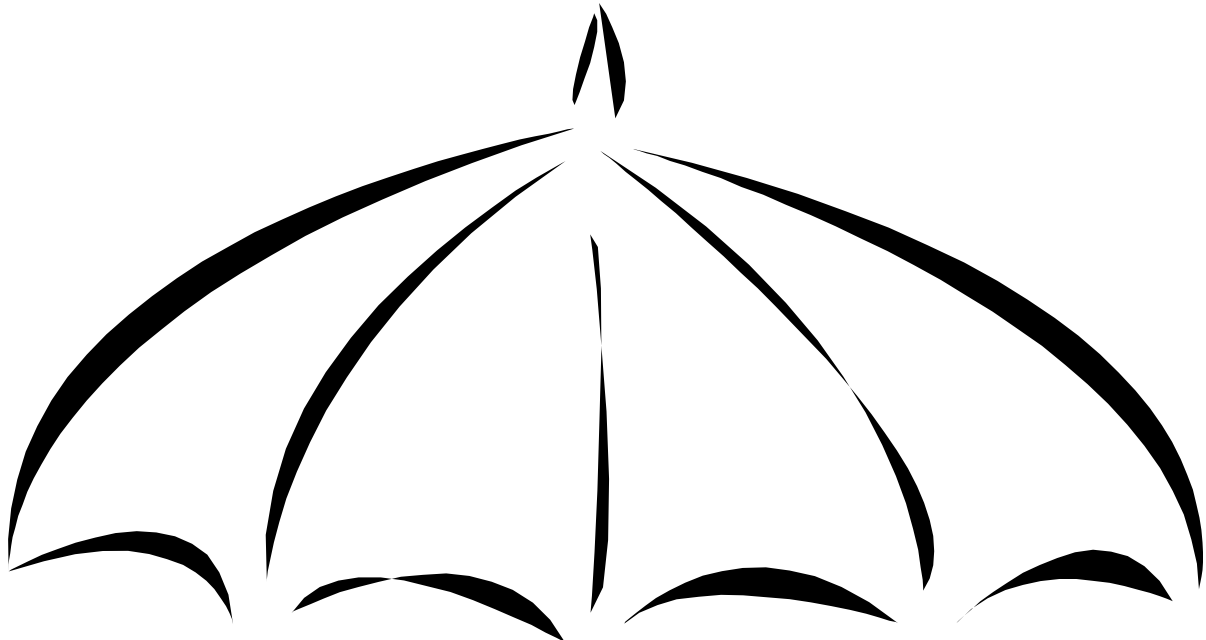


PACMIS PROCEDURES



Covered At Work

Bureau of Eligibility Services
August 2003

PACMIS Screens & Coding

◆ REAP

REAP	REGISTER APPLICATION	27OCT03 14:33 CAROLYN E
CASE NAME:	CASE NUMBER: 00029934	
PRIMARY DEPT/REG/OFF: <u>HAT</u>	TEAM: <u>3</u>	CASELOAD: <u>11</u> EVANS, CAROLYN
DRUG/ALCOHOL REHAB: <u>N</u>		
EXPEDITED F.S: <u> </u>	1	2
PROGRAMS APPLIED FOR: <u>PC</u>	3	4
APP RECEIVED DATE: <u>04AUG03</u>	5	6
BEN EFFECTIVE DATE: <u>04AUG03</u>		
MEDICAID CATEGORY: <u> </u>		
MEDICAID COVERAGE GRP: <u> </u>		
CLIENT NAME	DOB	S.S.N
COVERED, CAN I BE	07APR1980	528 99 0000
COVERED, AM I	29JAN1982	529 11 9999
COVERED, I AM	05AUG1995	528 22 8888
COVERED, WISH I WERE	16NOV2001	528 99 2228
	SEX	REL
	M	<u>PI</u>
	F	<u>SP</u>
	M	<u>CH</u>
	F	<u>CH</u>
		APP POS
		<u>01</u>
		<u>02</u>
		<u>03</u>
		<u>04</u>
ADDRESS INFORMATION TO BE ENTERED? : <u>Y</u>		
48	:00.7	24/39

- ▶ **“PC” is the program type for BOTH the Primary Care Network program (PC) and the Covered at Work program (CW).** No entry is allowed in SUBTYPE or MEDICAID CATEGORY or MEDICAID COVERAGE GROUP fields.
- ▶ **CW Benefit Effective Date** is the date the application is received, but cannot be before 01AUG03 or in a month before a premium is paid for employer-sponsored health insurance coverage.

No Retroactive Coverage Allowed.

◆ SEPA

SEPA										SETUP PARTICIPATIONS										27OCT03 14:38	
																				CAROLYN E	
CASE NAME: COVERED, CAN I BE										CASE NUMBER: 00029934 MONTH: AUG03											
NAME	REL	SUB	PGM	CAT/	COV	PART	DAY	RSN	DATE	NAME	REL	SUB	PGM	CAT/	COV	PART	DAY	RSN	DATE		
01 CAN I C	PI	PC				<u>IN</u>	4														
02 AM I C	SP	PC				<u>IN</u>	4														
03 I AM C	CH	PC				<u>QC</u>	4														
04 WISH C	CH	PC				<u>QC</u>	4														

SPECIAL PROJECT INDICATOR-->

HH TAX DEP: _ MORE PROGRAMS: _ MORE CLIENTS: _ NEXT--> _

4B :01.0 24/76

- Any adult who has access to employer-sponsored coverage needs to be coded **IN** initially.

Note: The CW reimbursement check for the household will be sent to the PI. The policy holder may be the PI or the spouse.

◆ ETRC

```

* ERROR *      ENTER THE CODE FROM LANGUAGE CODE TABLE FOR MAIN HH LANGUAGE
ETRC           ETHNIC / RESIDENCY / CITIZENSHIP / IDENTITY / SCHOOL  27OCT03 14:59
                                           CAROLYN E
CASE NAME: COVERED, CAN I BE                      CASE NUMBER: 00029934 MONTH AUG03
ID: Y VR: HC HH LANGUAGE CODE: EN TPL: Y DATE: 04AUG03 UM TPL:   DATE:

```

	NAME	REL	ETH	CIT	VR	RES	VR	SCH	SCH	FS	OTH	CAAL
								CODE	ST	EX	VR	INS
01	CAN I C	PI	<u>WH</u>	<u>US</u>	<u>HC</u>	<u>RE</u>	<u>HC</u>	<u>NOT</u>	<u>NA</u>	<u>HC</u>	<u>A</u>	
02	AM I C	SP	<u>WH</u>	<u>US</u>	<u>HC</u>	<u>RE</u>	<u>HC</u>	<u>NOT</u>	<u>NA</u>	<u>HC</u>	<u>A</u>	
03	I AM C	CH	<u>WH</u>	<u>US</u>	<u>HC</u>	<u>RE</u>	<u>HC</u>	<u>NOT</u>	<u>NA</u>	<u>HC</u>	<u>N</u>	
04	WISH C	CH	<u>WH</u>	<u>US</u>	<u>HC</u>	<u>RE</u>	<u>HC</u>	<u>NOT</u>	<u>NA</u>	<u>HC</u>	<u>N</u>	

MORE CLIENT: _ NEXT--> _

4B ■ :00.8 24/75

- ▶ Post an “A” in the OTH INS field on ETRC if the individual has employer-sponsored health insurance available and they are not already enrolled.
 - Person must be coded IN on SEPA for PACMIS to accept the “A” code in the OTH INS field on ETRC.
- ▶ The “A” in this field, will generate the Covered at Work Employee Cost screen (CWEK) which calculates the cost of coverage %.

◆ **SSDO/MASD**

No changes to the SSDO or the MASD screen.

◆ **INCOME SCREENS**

EAIN		EARNED INCOME		27OCT03 15:04	
		PROSPECTIVE		CAROLYN E	
CASE NAME: COVERED, CAN I BE				CASE NUMBER: 00029934 MONTH: AUG03	
NAME	RELN	S Y TYP LS	MONTHLY AMOUNT	MONTHLY HOURS	ABD W CHP\PC CAAL
					AMT VR DATE
01 CAN I C PI	___	WA ___	TOTAL: 1025	120	1025 HC
			TOTAL: ___		
			TOTAL: ___		
02 AM I C SP	___		TOTAL: ___		
			TOTAL: ___		
			TOTAL: ___		
03 I AM C CH	___		TOTAL: ___		
			TOTAL: ___		
			TOTAL: ___		
04 WISH C CH	___		TOTAL: ___		
			TOTAL: ___		
			TOTAL: ___		

MORE INCOME: _ MORE CLIENTS: _ RETROSPECTIVE: _ NEXT--> _

4B :00.7 24/76

- ▶ No changes to the UNIN, EAIN or SEEI Screens.
- ▶ POST all earned and unearned income on the income screens in the CHP/PCN field.

◆ EXPE

New Expense Type = EC (Employee Cost)

EXPE				EXPENSE PROSPECTIVE				27OCT03 15:19 CAROLYN E	
CASE NAME: COVERED, CAN I BE				CASE NUMBER: 00029934 MONTH: AUG03					
	NAME	REL	W S	TY	SUB	MONTHLY AMOUNT	ABD AMOUNT	VR	CAAL DATE
01	CAN I C	PI	-	EC	-	45.00	0.00	HC	
			-	-	-			-	
			-	-	-			-	
02	AM I C	SP	-	EC	-	105.00	0.00	HC	
			-	-	-			-	
			-	-	-			-	
03	I AM C	CH	-	-	-			-	
			-	-	-			-	
			-	-	-			-	
04	WISH C	CH	-	-	-			-	
			-	-	-			-	
			-	-	-			-	

MORE EXPENSES: _ MORE CLIENTS: _ RETROSPECTIVE: _ NEXT--> _

48 :01.0 24/76

Determine the cost for each person to enroll in the employer-sponsored health insurance plan.

- ▶ Use factoring rules when figuring cost per individual.
Don't forget, you can use the work screen to factor.
- ▶ Enter the EC code in the EXP TYP field and enter the cost of coverage for each person in the MONTHLY AMOUNT field.

CWEC uses the EC amount when calculating the % of the cost of coverage.

◆ CWEC

Covered At Work Employee Cost Screen (CWEK).

- ▶ Determines eligibility for CW based on household's gross income and the cost of coverage for each individual.
- ▶ CWEC will only show up for a benefit month where a client's OTH INS code is "A". CWEC is attached to and appears before PCIE.
 - PCIE cannot be accessed until CWEC changes the "A" to another code.
- ▶ Once CWEC has changed the "A" to another code, it cannot be accessed unless you go back to ETRC and enter an "A" again in the OTH INS field.

No Nexting to CWEC!

**CWEC will do a new calculation
if you change the OTH INS code
on ETRC back to an A.**

CWEC Screen Data Elements

- ▶ **CLIENT NAME** - Name of each person with an "A" entered in OTH INS IND field on ETRC.
- ▶ **COST OF INSURANCE** - The amount required to obtain employer-sponsored health insurance coverage for each individual. This is the "EC" amount that was posted on EXPE.
- ▶ **HH GROSS INCOME** - Household's total countable gross earned and unearned income for the benefit month.

CWEC		COVERED AT WORK		27OCT03 15:24	
		EMPLOYEE COST OF INSURANCE		CAROLYN E	
CASE NAME: COVERED, CAN I BE			CASE NUMBER: 00029934 MONTH: AUG03		
	OTH	COST OF	HH GROSS		
NAME	INS REL	INSURANCE	INCOME	CW DETERMINE MESSAGE	
01	CAN I C A PI	45.00	1025.00	<div style="border: 1px solid black; padding: 5px;"> EMPLOYEE COST IS <= 5 % NOT ELIGIBLE FOR CW OR PC, OTH INS WILL BE CHANGED TO "F" GO TO SEPA AND CHANGE PARTICIPATION TO DM. </div>	
02	AM I C A SP	105.00	1025.00	<div style="border: 1px solid black; padding: 5px;"> EMPLOYEE COST > 5 % AND <= 15 %. ELIGIBILITY LIMITED TO COVERED AT WORK PROGRAM </div>	
CLIENT HAS ACCESS TO INS-MUST DETERMINE CW ELIG FIRST- PCIE IS NEXT SCREEN					
				NEXT--> _____	
4B		:00.9		01/01	

CWEC Calculation

- ▶ CWEC compares the Cost of Coverage information posted on EXPE for each individual to the household income posted on the income screens for the benefit month and determines the percentage.
 - Screen will calculate Cost of Coverage % for any benefit month during the certification period.
 - ✓ This calculation is separate from the income eligibility determination made on PCIE. PCIE uses income from the month determined eligible for the entire certification period.

- **RESULTS** - Displays the eligibility decision, along with follow-up instructions. Each individual may have different cost %. Results displayed will be for eligibility determinations made in the initial or first month of the certification period. See table below for Result Displays.

Cost of Coverage	"A" Code Change	Results Displays
Less than or equal to 5%	Auto changes to F	COST OF INS % IS < OR = 5%, NOT ELIGIBLE FOR CW or PC. OTH INS WILL BE CHANGED TO "F". DENY/CLOSE PGM OR GO TO SEPA AND CHANGE PARTICIPATION TO "DM".

More than 5% but less than or equal to 15%	Auto changes to L	COST PERCENT > 5% AND < = TO 15%. ELIGIBILITY LIMITED TO COVERED AT WORK PROGRAM. OTHER INS WILL BE CHANGED TO "L" ON ETRC.
--	-------------------	---

More than 15%	Worker must enter either the CW or PC code on CWEC and press ENTER. ➤ If the choice is CW, the C code is auto entered in the OTH INS field on ETRC. ➤ If the choice is PC, the P code is auto entered in the OTH INS field on ETRC.	EMPLOYEE COST > 15%. CHOOSE PRIMARY CARE WAIVER (PC) OR COVERED AT WORK (CW).
---------------	---	---

*****SEE APPENDIX "A" FOR ETRC CODES*****

◆ **ETRC ~ AGAIN ... AFTER CWEC FIGURED COST %**

ETRC															ETHNIC / RESIDENCY / CITIZENSHIP / IDENTITY / SCHOOL															27OCT03 15:27																																												
																														CAROLYN E																																												
CASE NAME: COVERED, CAN I BE																														CASE NUMBER: 00029934 MONTH AUG03																																												
ID: <u>Y</u> VR: <u>HC</u> HH LANGUAGE CODE: <u>EN</u> TPL: <u>Y</u> DATE: <u>04AUG03</u> UM TPL: DATE:																																																																										
															SCH SCH FS															OTH															CAAL																													
NAME REL ETH CIT VR RES VR															CODE ST EX VR															INS															DATE																													
01 CAN I C PI															<u>WH</u> <u>US</u> <u>HC</u> <u>RE</u> <u>HC</u>															<u>NOT</u> <u>NA</u> <u>HC</u>															<u>F</u>																													
02 AM I C SP															<u>WH</u> <u>US</u> <u>HC</u> <u>RE</u> <u>HC</u>															<u>NOT</u> <u>NA</u> <u>HC</u>															<u>L</u>																													
03 I AM C CH															<u>WH</u> <u>US</u> <u>HC</u> <u>RE</u> <u>HC</u>															<u>NOT</u> <u>NA</u> <u>HC</u>															<u>N</u>																													
04 WISH C CH															<u>WH</u> <u>US</u> <u>HC</u> <u>RE</u> <u>HC</u>															<u>NOT</u> <u>NA</u> <u>HC</u>															<u>N</u>																													

MORE CLIENT: _ NEXT--> _

48 :00.8 05/06

- ▶ CWEC screen changed the OTH INS code on ETRC for PI and spouse.
 - PI was changed from an **A** to an **F**. The PI is not eligible for CW or PC. PI's SEPA code needs to be changed from IN to DM.
 - SP was changed from an **A** to an **L** and is eligible for CW.

*****SEE APPENDIX "A" FOR ETRC CODES*****

◆ **SEPA ~ WHEN INDIVIDUAL FAILS PC & CW ELIGIBILITY
BECAUSE OF COST OF COVERAGE**

PI's Cost of Coverage is less than 5% so they are not eligible for either PC or CW. Their SEPA participation code needs to be changed from IN to DM. If this is not done, the entire case fails eligibility on PCIE.

SEPA		SETUP PARTICIPATIONS										27OCT03 15:32	
												CAROLYN E	
CASE NAME: COVERED, CAN I BE										CASE NUMBER: 00029934 MONTH: AUG03			
NAME	REL	PGM	CAT/	START	INELG	INELG	PGM	CAT/	START	INELG	INELG		
SUB	COV	PART	DAY	RSN	DATE	SUB	COV	PART	DAY	RSN	DATE		
01 CAN I C	PI	PC		<u>DM</u>	4	—							
02 AM I C	SP	PC		<u>IN</u>	4	—							
03 I AM C	CH	PC		<u>OC</u>	4	—							
04 WISH C	CH	PC		<u>OC</u>	4	—							

SPECIAL PROJECT INDICATOR-->

HH TAX DEP: __ MORE PROGRAMS: __ MORE CLIENTS: __ NEXT--> __

48 :01.1 24/76

- ▶ Must roll through SSDO, ETRC and MASD screens again before going to PCIE.

◆ PCIE

* INFO *		TO ESTABLISH PC START AND END DATES, PLEASE ENTER THROUGH SCREEN	
PCIE	PRIMARY CARE INCOME ELIGIBILITY	27OCT03 15:58	CAROLYN E
CASE NAME: COVERED, CAN I BE		CASE NUMBER: 00029934 MONTH: AUG03	
HH SIZE : 04		DATE DETERMINED ELIGIBLE: 04AUG03	
_ EMPLOYMENT INCOME : 1025.00			
_ SELF-EMPLOYMENT INCOME : 0.00			
TOTAL EARNED INCOME: 1025.00		_ TOTAL UNEARNED INCOME : 0.00	
		TOTAL COUNTABLE INCOME : 1025.00	
* ENROLLMENT FEE REQUIRED *		INCOME LIMIT : 2300.00	
BENEFIT AUTHORIZATION:		<i>Protected</i>	
ISS REASON: <u>IN</u> ISS INDICATOR: <u>MO</u>		PAYEE SETUP REQ: <u>N</u>	
CERTIFICATION END DATE: AUG04			
HOLD REASON: _____			
HOLD REMINDER DATE: _____			
IS ELIGIBLE - ENROLLMENT FEE REQUIRED		NEXT--> _____	
4E		:00.6	
		24/76	

- ▶ PCIE is the eligibility determination screen which compares the household size and countable income to 150% of the Federal Poverty Level.
- ▶ **Enrollment Fee Required** - payment of the enrollment fee is required before the benefit can be authorized. The benefit authorization field is protected and will prevent a benefit from being authorized before the fee has been collected.
- ▶ If eligible, you must ENTER through the PCIE screen before the enrollment fee can be paid.
- ▶ Send the GIPC notice.

◆ PRCE

* INFO *		IF CORRECT ENTER AUTHORIZATION PCN	
PRCE	PRIMARY CARE ENROLLMENT FEE	27OCT03 16:22 CAROLYN E	
CASE NAME: COVERED, CAN I BE		CASE NUMBER: 00029934	
BENEFIT MONTH: AUG03			
ELIGIBILITY START DATE: 04AUG03 THRU THE LAST DAY OF <u>AUG04</u>			
DATE ENROLLMENT FEE PAID (DDMMYY):		<u>20AUG03</u>	
TYPE OF PAYMENT:		<u>CK</u> CHECK	
PERSONS COVERED BY THE PAYMENT:			
NAME	REL	DOB	PC ELIG END
AM I C	SP	29JAN1982	AUG04
WORKER AUTHORIZATION:		<u>0498</u>	
		NEXT--> _____	
4B		:00.7	
		24/75	

- ▶ The Enrollment Fee is collected and posted as paid by the business office on the PRCE screen. *Follow local office procedures already in place for PC.*
- ▶ Authorizing PRCE will generate an EWAL alert to the worker that the enrollment fee has been paid and the PCIE screen needs to be authorized to approve benefits.

► **PCIE ~ AGAIN**

PCIE	PRIMARY CARE INCOME ELIGIBILITY	27OCT03 16:28 CAROLYN E
CASE NAME: COVERED, CAN I BE HH SIZE : 04		CASE NUMBER: 00029934 MONTH: AUG03 DATE DETERMINED ELIGIBLE: 04AUG03
_ EMPLOYMENT INCOME : 1025.00		
_ SELF-EMPLOYMENT INCOME : 0.00		
TOTAL EARNED INCOME: 1025.00		_ TOTAL UNEARNED INCOME : 0.00
		TOTAL COUNTABLE INCOME : 1025.00
<div style="border: 1px solid black; padding: 5px;"> *** ENROLLMENT FEE PAID *** BENEFIT AUTHORIZATION: 0498 </div>		INCOME LIMIT : 2300.00
ISS REASON: <u>IN</u> ISS INDICATOR: <u>MO</u>		PAYEE SETUP REQ: <u>N</u>
CERTIFICATION END DATE: AUG04		
HOLD REASON: _____		
HOLD REMINDER DATE: _____		
IS ELIGIBLE - AUTHORIZATION REQUIRED		NEXT--> _____
4B ■	⚙ :01.1	19/14

- Once the enrollment fee is paid the BENEFIT AUTHORIZATION field is no longer protected. Enter your authorization number to approve PCN. Send the proper approval notice.

◆ CAP2

CAP2		CASE PROFILE - PAGE 2				27OCT03 16:36				
						CAROLYN E				
CASE NAME: COVERED, CAN I BE		CASE NUMBER: 00029934				MONTH: AUG03				
PROGRAM TYP/SUB PC	CVG CAT	PRG GRP	HH ALT	BENEFIT SZ	APP EFF DAT	PROG RECEIVE	STATUS STATUS	CL DATE	REV DUE	CUR MON
				04	04AUG03	04AUG03	OPEN	27OCT03	AUG04	AUG03
CLIENT NAME		CLIENT ID SSN		DOB AGE		REL	SEX	PER ALT	PROGRAM TYPE PC	
COVERED, CAN I BE		030069330		07APR1980		PI	M		DM	
		528-99-0000		023						
COVERED, AM I		040069330		29JAN1982		SP	F		IN	
		529-11-9999		021						
COVERED, I AM		060069330		05AUG1995		CH	M		OC	
		528-22-8888		008						
COVERED, WISH I WERE		070069330		16NOV2001		CH	F		OC	
		528-99-2228		001						
VIEW PRIOR MONTH CLIENT INFO (MMYY): _____								NEXT--> _____		
4B		:01.3				24/75				

CAP2 will not distinguish between PC and CW. It will just show PC.

◆ MEBH

```

* INFO *      END OF DISPLAY REACHED
MEBH          MEDICAL BENEFIT HISTORY SCREEN          07SEP03 20:55
                                                    CAROLYN E

CASE NAME:    COVERED, CAN I BE          CASE NUMBER: 00029934

BEN  PGM  CVG  MAIL  EXCESS  DOC  ISS  ISS  S
MTH  TYP  CAT  GRP  NAME  DATE  AMOUNT  STA  RSN  IND  I  PCN
AUG03  PC CW          AM I  C          0.00          IN  MO          0498

```

PROGRAM TYPE: ____ BENEFIT MONTH: ____ NEXT--> ____

4B :02.6 24/75

- ▶ MEBH displays which PCN program a person is eligible for by showing either a PC or CW indicator after the PC Program Type. This indicator is based on the OTH INS code on ETRC and will not show on any other screen.
 - **PC** - individual is eligible for the Primary Care Network program. ETRC OTH INS code is C or L.
 - **CW** - individual is eligible for the Covered at Work program. ETRC OTH INS code is M, N or P.

◆ EXAMPLE - COST OF COVERAGE EXCEEDS 15%

Scenario:

Employer-sponsored health insurance is available to the PI through his employer. The PI's monthly premium cost to enroll in the coverage is \$100 and the cost to enroll his spouse is an additional \$25. Since he must be enrolled for her to enroll, her premium cost = \$125.

- ▶ Code the both the PI and Spouse **IN** on **SEPA**.
- ▶ Since it's possible for both of them to enroll in employer-sponsored coverage, post an **A** in the **OTH INS** field on **ETRC**.

```

ETRC          ETHNIC / RESIDENCY / CITIZENSHIP / IDENTITY / SCHOOL 07SEP03 14:51
                                CAROLYN E
CASE NAME: ENROLL, SHOULD I          CASE NUMBER: 00029961 MONTH AUG03
ID: Y VR: HC HH LANGUAGE CODE: EN TPL: Y DATE: 20AUG03 UM TPL:   DATE:
      NAME      REL ETH CIT VR  RES VR  SCH  SCH FS      OTH      CAAL
      01 SHOUL E  PI  WH US HC RE HC NOT NA  ___ CS  A      _____
      02 SHALL E  SP  WH US HC RE HC NOT NA  ___ CS  A      _____

```

OTH
INS
A

MORE CLIENT: _
NEXT--> _

48
01.7
24/75

- ▶ Complete information on the SSDO and MASD screens. Post all earned and unearned income on UNIN, EAIN & SEEI.

EXPE		EXPENSE PROSPECTIVE				07SEP03 14:58 CAROLYN E			
CASE NAME: ENROLL, SHOULD I					CASE NUMBER: 00029961 MONTH: AUG03				
NAME	REL	W S	TY	SUB	MONTHLY AMOUNT	ABD AMOUNT	VR	CAAL DATE	
01	SHOUL E	PI	<u>EC</u>	—	100.00	0.00	HC	—	
			—	—	—	—	—	—	
02	SHALL E	SP	<u>EC</u>	—	125.00	0.00	HC	—	
			—	—	—	—	—	—	
			—	—	—	—	—	—	

MORE EXPENSES: _ MORE CLIENTS: _ RETROSPECTIVE: _ NEXT--> _

4B :00.7 08/27

- Post the factored premium cost to enroll for each individual on **EXPE** using the **EC** code type in the MONTHLY AMOUNT field.

- ▶ CWEC screen will determine the Cost of Coverage % for each individual.
 - In this scenario, the Cost of Coverage exceeds 15% for both the PI and his spouse. They both have the option to choose either PC or CW eligibility.

CWEC		COVERED AT WORK		07SEP03 16:11	
		EMPLOYEE COST OF INSURANCE		CAROLYN E	
CASE NAME: ENROLL, SHOULD I		CASE NUMBER: 00029961 MONTH: AUG03			
	OTH	COST OF	HH GROSS		
NAME	INS REL	INSURANCE	INCOME	CW DETERMINE MESSAGE	
01	SHOUL E A PI	100.00	500.00	<div style="border: 1px solid black; padding: 5px;"> EMPLOYEE COST IS > 15% CHOOSE PRIMARY CARE WAIVER (PC) OR COVERED AT WORK (CW) </div>	
				CW	Post code here for PI
02	SHALL E A SP	125.00	500.00	<div style="border: 1px solid black; padding: 5px;"> EMPLOYEE COST IS > 15%. CHOOSE PRIMARY CARE WAIVER (PC) OR COVERED AT WORK (CW) </div>	
				PC	Post code here for spouse
CLIENT HAS ACCESS TO INS-MUST DETERMINE CW ELIG FIRST- PCIE IS NEXT SCREEN					
				NEXT--> _____	

48
:00.9
24/76

- ▶ The PI chooses CW and enrolled in the employer-sponsored coverage. Post the CW code in the blank line next to the PI's Cost Determination Message.
- ▶ The Spouse chooses PC and did not enroll in the employer-sponsored coverage. Post the PC code in the blank line next to the spouse's Cost Determination Message.

- ▶ PCIE determines that case is eligible for PCN. Worker enters through the PCIE screen and sends the GIPC notice.
- ▶ The enrollment fee is paid and the payment is posted on PRICE.
- ▶ EWAL alert is generated to worker that enrollment fee is paid and PCIE needs to be authorized.

PCIE	PRIMARY CARE INCOME ELIGIBILITY	07SEP03 15:10 CAROLYN E
CASE NAME: ENROLL, SHOULD I HH SIZE : 02		CASE NUMBER: 00029961 MONTH: AUG03 DATE DETERMINED ELIGIBLE: 20AUG03
_ EMPLOYMENT INCOME : 500.00 _ SELF-EMPLOYMENT INCOME : 0.00		
TOTAL EARNED INCOME: 500.00		_ TOTAL UNEARNED INCOME : 0.00
		TOTAL COUNTABLE INCOME : 500.00
*** ENROLLMENT FEE PAID ***		
BENEFIT AUTHORIZATION: 0498		INCOME LIMIT : 1515.00
ISS REASON: <u>IN</u> ISS INDICATOR: <u>MO</u> CERTIFICATION END DATE: AUG04 HOLD REASON: _____ HOLD REMINDER DATE: _____		PAYEE SETUP REQ: <u>N</u>
IS ELIGIBLE - AUTHORIZATION REQUIRED		NEXT--> _____
4B	:00.7	19/14

- ▶ Worker authorizes PCIE and sends proper approval notice.

* INFO *		END OF DISPLAY REACHED									
MEBH		MEDICAL BENEFIT HISTORY SCREEN									
		07SEP03 21:02									
		CAROLYN E									
CASE NAME:		ENROLL, SHOULD I					CASE NUMBER: 00029961				
BEN	PGM	CVG				MAIL	EXCESS	DOC	ISS	ISS	S
MTH	TYP	CAT	GRP	NAME		DATE	AMOUNT	STA	RSN	IND	I PCN
AUG03	PC	CW		SHOUL			0.00		IN	MO	0498
	PC			SHALL							
<div>PROGRAM TYPE: BENEFIT MONTH: NEXT--> </div>											
48		:01.0								24/75	

- ▶ MEBH shows PI is eligible for the Covered at Work program by showing a CW indicator after the PC Program Type.
- ▶ MEBH shows the spouse is eligible for the Primary Care Network program by showing a PC indicator after the PC Program Type.

◆ **ENROLLMENT FEE**

A new enrollment fee is required at every initial certification period (every 12 months). Follow these rules when setting up PCN cases:

- ▶ If PI is eligible CW and spouse is eligible PC, (or visa versa), set them up on the same case and only collect one enrollment fee.
- ▶ If both the PI and the spouse have access to insurance through their own employers, set them up on the same case and only collect one enrollment fee. The reimbursement check for the total amount will be sent to the PI.
- ▶ Do not collect a new enrollment fee when switching from PC to CW or visa versa.

◆ **ISSUANCE**

No medical card will issue. The only benefit is a monthly reimbursement check for employer-sponsored health insurance coverage.

◆ **REVIEWS**

The review form and procedures are the same for CW as PC.

At the end of the certification period, all eligibility requirements need to be re-evaluated. This includes doing a Cost of Coverage recalculation for any person open CW in the month prior to the review month or who has access to employer-sponsored health insurance coverage.

At review, along with updating all other factors of eligibility, take the following action to determine the Cost of Coverage for the new certification period.

- ▶ Look at SEPA and make sure any PI or spouse who was open CW in the prior month or has access to employer-sponsored coverage is coded **IN**.
- ▶ Code OTH INS field **A** on ETRC.
- ▶ Enter **factored** income on income screens.
- ▶ Enter **factored** premium cost to enroll in employer coverage on EXPE using the EC code.
- ▶ Let CWEC figure Cost of Coverage % and determine eligibility.
- ▶ Pass through PCIE.
- ▶ Collect Enrollment Fee.
- ▶ Authorize PCIE.

AT REVIEW REMEMBER:

ETRC OTH INS code needs to be changed to an “A” for any person on CW or with access to employer-sponsored insurance.


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* WARNING *  CLIENT ENROLLMENT FEE DATES NOT IN SYNC.  SEE PRCE SCREEN.
PCIE                PRIMARY CARE INCOME ELIGIBILITY                26OCT04 20:45
                                CAROLYN E

CASE NAME: COVERED, CAN I BE          CASE NUMBER: 00029934 MONTH: SEP04
HH SIZE   : 04                        DATE DETERMINED ELIGIBLE: 04AUG03

_ EMPLOYMENT INCOME      :    1025.00
_ SELF-EMPLOYMENT INCOME :         0.00

      TOTAL EARNED INCOME:    1025.00   _ TOTAL UNEARNED INCOME :         0.00

                                TOTAL COUNTABLE INCOME :    1025.00

* ENROLLMENT FEE REQUIRED *
* HAS OTH INS BEEN CHANGED TO "A" ON ETRC ?   INCOME LIMIT :    2300.00
BENEFIT AUTHORIZATION:

ISS REASON: RE      ISS INDICATOR: MO                PAYEE SETUP REQ: N
CERTIFICATION END DATE: AUG05
HOLD REASON: _____
HOLD REMINDER DATE:  _____

IS ELIGIBLE - ENROLLMENT FEE REQUIRED                                NEXT-->  _____
4B  :01.3                                                            24/76

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During the review month, PACMIS will generate a reminder to do a new Cost of Coverage (or change the ETRC code to an "A") on the PCIE screen.

*** HAS OTH INS BEEN CHANGED TO "A" ON ETRC?**

This edit message will only appear on PCIE the first month of a new certification period before the enrollment fee is paid and when an individual on the case was coded on L, P or C in the OTH INS field on ETRC in the month prior to the review month.

◆ CHANGES REPORTED DURING A CERTIFICATION PERIOD

Changes can be made during the certification period to cases open PCN without doing a new income calculation for the certification period or collecting a new enrollment fee.

Information entered for the benefit month will be used when calculating the cost of insurance coverage, not what is entered for the first month of the certification period. Each individual's "EC" amount or cost for insurance coverage will be divided by the Household's Gross Countable Income to get the Cost of Insurance %.

Note: To recalculate the Cost of Coverage for the benefit month you must change the OTH INS code back to an A.

When PC is open and client reports access to employer-sponsored insurance and chooses not to enroll, they can remain on PC until the end of the certification period. At the end of the certification period, they would not be eligible because they have access to insurance.

If the client gains access to insurance any time during their certification period, CWEC screen will calculate.

ADDING A SPOUSE

A spouse may be added to either PC or CW if they meet all eligibility requirements. Both spouses do not have to be on the same PCN program.

**ONLY MAKE ETRC CHANGES TO THE PERSON BEING ADDED.
DO NOT CHANGE THE ETRC CODE FOR THE PERSON OPEN PCN
UNLESS THEY ALSO HAVE A CHANGE.**

Follow these steps if the spouse has access to employer-sponsored health insurance coverage for the benefit month they are being added:

- ▶ Add the spouse to the case and code them **IN** on SEPA.
- ▶ Post an **A** in the OTH INS field on ETRC for the individual.
- ▶ Post current factored income best estimate on the income screens.
(This is just to calculate Cost of Coverage % and it will not change the income used to establish the certification period.)
- ▶ Post factored premium amount for the individual on EXPE.
- ▶ CWEC will calculate Cost of Coverage % for correct ETRC code.
 - If eligible PC or CW, authorize PCIE.
 - ✓ Order a duplicate card on the CARD screen.
 - If not eligible, go back to SEPA and code the person "DM".
Authorize PCIE.

ENROLLS IN EMPLOYER-SPONSORED COVERAGE - OPEN PC

- ▶ A recipient must report within 10 days that they have enrolled in employer-sponsored coverage and their cost must exceed 5% in order to switch to Covered at Work.
 - Cost does not exceed 5%, no longer eligible.
 - Does not report within 10 days, no longer eligible.

GAINS ACCESS TO EMPLOYER-SPONSORED COVERAGE - OPEN PC

- ▶ A PC recipient who gains access to employer-sponsored health insurance may switch to CW if they meet the Cost of Coverage requirement.

Determine the Cost of Coverage for the benefit month:

- Change individual's ETRC code to A.
- Post current factored income on income screens.
- Post factored premium amount for the individual on EXPE.

CWEC calculated Cost of Coverage:

- 5-15% - Person may switch to CW if they **CHOOSE TO ENROLL**. CWEC will change the ETRC code to L. Authorize PCIE through the current issuance month.
- Exceeds 15% - Person may change to CW if they **CHOOSE TO ENROLL**. Post correct code on CWEC. If chooses to switch to CW, enter the CW code on CWEC. This will change the ETRC OTH INS code to C. Authorize PCIE through the current issuance month.
- ▶ A recipient who **CHOOSES NOT TO ENROLL** in employer-sponsored coverage may remain open for PC no matter what their Cost of Coverage % is until the end of the certification period.
 - At the end of the certification period all factors of eligibility must be considered, including Cost of Coverage.

COST OF COVERAGE CHANGES - OPEN CW

**WHEN THE PREMIUM AMOUNT CHANGES
FOR THE EMPLOYEE OR THEIR SPOUSE,
THE NEW AMOUNT MUST BE POSTED ON EXPE
SO THE PROPER PREMIUM AMOUNT IS REIMBURSED.**

- ▶ If premium decreases, recalculate Cost of Coverage %:

- | |
|---|
| <ul style="list-style-type: none">• Change ETRC code to A.• Post factored premium amount for the individual on EXPE. |
|---|

- If cost of coverage exceeds 5%, person remains open CW.
- If cost of coverage drops to 5% or below, the person is no longer eligible.

INVOLUNTARILY LOSES EMPLOYER-SPONSORED COVERAGE - OPEN CW

- ▶ Recipient may switch to the PC program.
 - Change the individuals ETRC OTH INS code from L or C to M or N.
 - Authorize PCIE through the current issuance month.

CWEC EDIT MESSAGES

Cost of Coverage	“A” Code Change	Results Displays
CWEC determines Cost of Coverage is less than or equal to 5% and auto changes the A code to F because the person is not eligible for either PC or CW. However, a recipient may remain on PC until the end of the certification period if they chose not to enroll in the employer-sponsored coverage. Change the ETRC OTH INS code to M or N.		
Less than or equal to 5%	Auto changes to F	COST OF INS % IS < OR = 5%, NOT ELIGIBLE FOR CW. OTH INS WILL BE CHANGED TO “F”. IF CURRENTLY ELIGIBLE PC CAN CONT UNTIL END OF CERT PERIOD. CHANGE F TO N OR M.

CWEC determines Cost of Coverage is greater than 5% but less than or equal to 15% and auto changes the A code to L because the person is eligible for CW. However, to be CW eligible, a person must enroll in the employer-sponsored coverage. A recipient who chooses not to enroll may remain PC eligible until the end of the end of the certification period. Change the ETRC OTH INS code to N or M.		
More than 5% but less than or equal to 15%	Auto changes to L	COST PERCENT > 5% AND < = TO 15%. OTHER INS WILL BE CHANGED TO “L”. IF CURRENTLY ELIGIBLE FOR PC AND CHOOSE NOT TO ENROLL IN EMP COV, CAN CONT UNTIL END OF CERT PERIOD. CHANGE L TO N/M.

CWEC determines Cost of Coverage is greater than 15%. Applicant or recipient has the option to remain on PC and not enroll in the employer-sponsored coverage or choose CW and enroll in the employer-sponsored coverage.		
More than 15%	Worker must enter either the CW or PC code on CWEC and press ENTER. ↘ If the choice is CW, the C code is auto entered in the OTH INS field on ETRC. ↘ If the choice is PC, the P code is auto entered in the OTH INS field on ETRC.	EMPLOYEE COST > 15%. CHOOSE PRIMARY CARE WAIVER (PC) OR COVERED AT WORK (CW).

◆ WARNINGS AND EDIT MESSAGES

ETRC:

Error Message	ERROR - C, L, P & F ARE ENTERED BY PACMIS “A” DETERMINES CW ELIGIBILITY.
Cause	Worker cannot enter “ C, L, P or F ” in Other Insurance Field on ETRC. These codes must be entered by the CVEC screen.
Solution	Enter an “ A ” in the Other Insurance field on ETRC when a person has access to employer-sponsored health insurance coverage. This will generate the CVEC screen and change the insurance code on the ETRC screen to C, L, P or F .

Error Message	ERROR - IF INSURANCE CODE IS “A” CLIENT MUST BE “IN” PC.
Cause	“ A ” code can only be entered in the Other Insurance Field for a person coded “ IN ” on SEPA for PCN.
Solution	Code person ‘ IN ’ on SEPA if has access to employer-sponsored health insurance coverage. If not enter a N, Y or M in Other Insurance field on ETRC.

Error Message	ERROR - BNFT ISSUED, CANNOT CHANGE CODE IN ISSUED MONTH.
Cause	When Issuance has already issued for the benefit month (PI indicator), cannot change from PC to CW or CW to PC.
Solution	Program has already issued for the month you are trying to change. Must choose a month that has not issued benefits to that individual to change the program from PC to CW or CW to PC.

CWEC

Error Message	ENTER COST OF INSURANCE (EC) IN MONTHLY AMOUNT ON EXPE.
Cause	No EC Expense Type posted in Monthly Amount field on EXPE . (A is posted on ETRC and there is no Cost of Coverage amount posted on EXPE .)
Solution	Enter person's cost to enroll in employer-sponsored coverage on EXPE. If no employer-sponsored coverage available, change ETRC OTH INS code from A to N , M , or Y .

Warning Message	COUNTABLE INCOME IS ZERO.
Cause	No income is counting when figuring Cost of Coverage %.
Solution	Check the income screens to make sure income is posted in the CHP/PCN column. If no income, consider eligibility for Medicaid.

◆ PCN NOTICES

Notice Name	Description
ALPC - Program Choice	PCN Client reports employer-sponsored insurance is available. The cost is greater than 15%. Client needs to choose whether to enroll or not. If they don't enroll they can stay on PCN until the end of the certification period. If they do enroll in the insurance, they can be enrolled in CW. Notice requests the client to make the choice and notify the worker.
GIBC- Benefit Change	Informs CW client that their reimbursement amount is changing because of a change in the amount they are paying for coverage.
MBPR- HH Member Removed	HH member has been removed from coverage.
MCAI/MDAI- Access to insurance	Case closed or app denied due to access to insurance cost is less than 5%.
MCPC/MDPC-PCN Action	Case closed or denied any reason.
MCPH/MDPH -Insurance	Case closed or denied enrolled in insurance other than employer-sponsored or client enrolled in employer-sponsored insurance and did not report within 10 days.
MCPP/MDPP -Premium not paid	Case closed at recertification or denied at app, premium not paid.
MDPT-Terminated Insurance	App denied, sanction terminated insurance voluntarily.
MMCW - CW app aproved	Covered at Work approved.
MMPC-PCN app approved.	PCN application approved.
MRPC- Review completed	Approve new certification period, review completed.
XDPP-Auto notice prem not paid	Client did not pay premium, app is denied.

ETRC Codes

The code in the “OTHER INSURANCE” field determines whether an individual or their spouse is eligible for the Primary Care Network program or the Covered at Work program or needs to have Covered at Work eligibility determined by CWEC.

The codes are:

N	No insurance & not Medicaid eligible.	Eligibility will be determined for PC.
Y	Currently enrolled in private or employer insurance.	Case fails PC and CW eligibility.
M	Not enrolled in other insurance, Medicaid eligible but spenddown required.	Client chose PC instead of Medicaid with a spenddown.
A	Access to employer-sponsored health insurance coverage. PACMIS will update A code to either F, L, C , or P .	The CWEC screen is included in the screen sequence. CWEC determines the Cost of Coverage % for each individual included in the employer-sponsored health plan. CWEC updates the A code on ETRC to a F, L, C or P based on the %.
F	Employee cost of coverage is less than or equal to 5%.	Not eligible for PC or CW.
L	Employee cost of coverage exceeds 5% and less than or equal to 15%.	Eligible for CW only.
C	Employee cost of coverage exceeds 15%. Chose CW eligibility. Post CW on CWEC.	Option to choose either PC or CW eligibility. Individual chose CW eligibility.
P	Employee cost of coverage exceeds 15%. Chose PC eligibility. Post PC on CWEC.	Option to choose either PC or CW eligibility. Individual chose PC eligibility.

Appendix A